

01/20/00  
jc760 U.S. PAT. & TM. OFF. 01/20/00  
EL169173

01-25-00

A

Please type a plus sign (+) inside this box → ☐ +

PTO/SB/05 (4/98)  
Approved for use through 09/30/2000. OMB 0651-0032  
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE  
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

|  |  |   |
|--|--|---|
| <b>UTILITY<br/>PATENT APPLICATION<br/>TRANSMITTAL</b><br><small>(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))</small> | Attorney Docket No.                      | HO57-002  |
|  | First Inventor or Application Identifier | Chris Parfeniuk                                 |
|  | Title                                    | Methods of Bonding First and Second Masses..... |
|  | Express Mail Label No.                   |   |

| APPLICATION ELEMENTS   |  |
|--|--|
| See MPEP chapter 600 concerning utility patent application contents.   |  |
| 1. <input checked="" type="checkbox"/> * Fee Transmittal Form (e.g., PTO/SB/17)<br>(Submit an original and a duplicate for fee processing)                                     |  |
| 2. <input checked="" type="checkbox"/> Specification [Total Pages 27]<br>(preferred arrangement set forth below)   |  |
| - Descriptive title of the Invention   |  |
| - Cross References to Related Applications   |  |
| - Statement Regarding Fed sponsored R & D  |  |
| - Reference to Microfiche Appendix   |  |
| - Background of the Invention  |  |
| - Brief Summary of the Invention   |  |
| - Brief Description of the Drawings (if filed)   |  |
| - Detailed Description   |  |
| - Claim(s)   |  |
| - Abstract of the Disclosure   |  |
| 3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 2]   |  |
| 4. Oath or Declaration [Total Pages 2]   |  |
| a. <input checked="" type="checkbox"/> Newly executed (original or copy)   |  |
| b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63(d))<br>(for continuation/divisional with Box 16 completed)   |  |
| i. <input type="checkbox"/> DELETION OF INVENTOR(S)<br>Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b). |  |

| ADDRESS TO:   |  |
|---|--|
| Assistant Commissioner for Patents<br>Box Patent Application<br>Washington, DC 20231  |  |
| 5. <input type="checkbox"/> Microfiche Computer Program (Appendix)                    |  |
| 6. Nucleotide and/or Amino Acid Sequence Submission<br>(if applicable, all necessary) |  |
| a. <input type="checkbox"/> Computer Readable Copy                                    |  |
| b. <input type="checkbox"/> Paper Copy (identical to computer copy)                   |  |
| c. <input type="checkbox"/> Statement verifying identity of above copies              |  |

| ACCOMPANYING APPLICATION PARTS  |  |
|---|--|
| 7. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))  |  |
| 8. <input type="checkbox"/> 37 C.F.R. § 3.73(b) Statement (when there is an assignee) <input checked="" type="checkbox"/> Power of Attorney   |  |
| 9. <input type="checkbox"/> English Translation Document (if applicable)  |  |
| 10. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citations   |  |
| 11. <input type="checkbox"/> Preliminary Amendment  |  |
| 12. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503)<br>(Should be specifically itemized)   |  |
| 13. <input type="checkbox"/> * Small Entity Statement(s) <input type="checkbox"/> Statement filed in prior application<br>(PTO/SB/09-12) <input type="checkbox"/> Status still proper and desired |  |
| 14. <input type="checkbox"/> Certified Copy of Priority Document(s)<br>(if foreign priority is claimed)   |  |
| 15. <input checked="" type="checkbox"/> Other: Check  |  |

**\* NOTE FOR ITEMS 1 & 13 IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).**

|  |                                     |   |
|--|-------------------------------------|---|
| 16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment:   |                                     |   |
| <input type="checkbox"/> Continuation  | <input type="checkbox"/> Divisional | <input type="checkbox"/> Continuation-in-part (CIP) |
| Prior application information: Examiner  |                                     | of prior application No: /                          |
| Group / Art Unit:  |                                     |   |
| For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. |                                     |   |

| 17. CORRESPONDENCE ADDRESS  |           |          |  |
|---|-----------|----------|--|
| <input checked="" type="checkbox"/> Customer Number or Bar Code Label |           | 021567   | or <input type="checkbox"/> Correspondence address below |
| (Insert Customer No. or Attach bar code label here)                   |           |          |  |
| Name  |           |          |  |
| Address   |           |          |  |
| City  | State     | Zip Code |  |
| Country   | Telephone | Fax      |  |

|                   |                          |                                   |         |
|-------------------|--------------------------|-----------------------------------|---------|
| Name (Print/Type) | David G. Latwesen, Ph.D. | Registration No. (Attorney/Agent) | 38,533  |
| Signature         |                          | Date                              | 1/20/00 |

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

EL169867036

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

| FEE TRANSMITTAL<br>for FY 1999   |  | Complete if Known    |                 |
|--|--|----------------------|-----------------|
| <i>Patent fees are subject to annual revision.<br/>Small Entity payments <u>must</u> be supported by a small entity statement,<br/>otherwise large entity fees must be paid. See Forms PTO/SB/09-12.</i> |  | Application Number   | Filed Herewith  |
|  |  | Filing Date          | Filed Herewith  |
|  |  | First Named Inventor | Chris Parfeniuk |
|  |  | Examiner Name        |                 |
|  |  | Group / Art Unit     |                 |
| TOTAL AMOUNT OF PAYMENT (\$)   |  | Attorney Docket No.  | HO57-002        |
|  |  |                      |                 |

  

| METHOD OF PAYMENT (check one)  | FEE CALCULATION (continued)   |                 |                 |  |                   |                 |          |     |     |     |                    |                                     |      |     |     |     |                   |   |      |     |     |     |                  |                           |      |     |       |     |                    |  |      |     |      |     |                        |  |                   |     |        |     |        |   |              |              |                |          |    |  |      |          |                    |     |          |   |                    |     |     |        |                |  |                |                 |                 |          |     |   |      |     |                        |     |     |  |      |     |                                   |     |     |                  |      |     |                                       |     |     |  |      |     |  |     |     |                          |      |     |  |     |                   |   |      |     |     |        |    |                                  |      |     |       |     |     |                                    |      |     |       |     |     |                                |      |     |     |     |     |                  |      |     |     |     |     |                 |      |     |     |     |     |                               |      |     |    |     |    |   |      |     |     |     |     |   |      |     |    |     |    |  |       |     |     |     |     |   |      |     |     |     |     |  |      |                           |  |  |  |  |      |                           |  |  |  |  |      |                                   |  |  |  |  |                   |  |  |  |  |  |       |
|--|---|-----------------|-----------------|--|-------------------|-----------------|----------|-----|-----|-----|--------------------|-------------------------------------|------|-----|-----|-----|-------------------|---|------|-----|-----|-----|------------------|---------------------------|------|-----|-------|-----|--------------------|--|------|-----|------|-----|------------------------|--|-------------------|-----|--------|-----|--------|---|--------------|--------------|----------------|----------|----|--|------|----------|--------------------|-----|----------|---|--------------------|-----|-----|--------|----------------|--|----------------|-----------------|-----------------|----------|-----|---|------|-----|------------------------|-----|-----|--|------|-----|-----------------------------------|-----|-----|------------------|------|-----|---------------------------------------|-----|-----|--|------|-----|--|-----|-----|--------------------------|------|-----|--|-----|-------------------|---|------|-----|-----|--------|----|----------------------------------|------|-----|-------|-----|-----|------------------------------------|------|-----|-------|-----|-----|--------------------------------|------|-----|-----|-----|-----|------------------|------|-----|-----|-----|-----|-----------------|------|-----|-----|-----|-----|-------------------------------|------|-----|----|-----|----|---|------|-----|-----|-----|-----|---|------|-----|----|-----|----|--|-------|-----|-----|-----|-----|---|------|-----|-----|-----|-----|--|------|---------------------------|--|--|--|--|------|---------------------------|--|--|--|--|------|-----------------------------------|--|--|--|--|-------------------|--|--|--|--|--|-------|
| <p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:</p> <p>Deposit Account Number: <u>23-0925</u></p> <p>Deposit Account Name: <u>Wells, St. John</u></p> <p><input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17</p> <p>2. <input checked="" type="checkbox"/> Payment Enclosed:<br/> <input checked="" type="checkbox"/> Check    <input type="checkbox"/> Money Order    <input type="checkbox"/> Other</p>  | <p>3. ADDITIONAL FEES</p> <table border="1" style="width: 100%; border-collapse: collapse; font-size: 0.8em;"> <thead> <tr> <th>Large Fee Code</th> <th>Entity Fee (\$)</th> <th>Small Fee Code</th> <th>Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>105</td><td>130</td><td>205</td><td>65</td><td>Surcharge - late filing fee or oath</td><td>0.00</td></tr> <tr><td>127</td><td>50</td><td>227</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet.</td><td>0.00</td></tr> <tr><td>139</td><td>130</td><td>139</td><td>130</td><td>Non-English specification</td><td>0.00</td></tr> <tr><td>147</td><td>2,520</td><td>147</td><td>2,520</td><td>For filing a request for reexamination</td><td>0.00</td></tr> <tr><td>112</td><td>920*</td><td>112</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td><td>0.00</td></tr> <tr><td>113</td><td>1,840*</td><td>113</td><td>1,840*</td><td>Requesting publication of SIR after Examiner action</td><td>0.00</td></tr> <tr><td>115</td><td>110</td><td>215</td><td>55</td><td>Extension for reply within first month</td><td>0.00</td></tr> <tr><td>116</td><td>380</td><td>216</td><td>190</td><td>Extension for reply within second month</td><td>0.00</td></tr> <tr><td>117</td><td>870</td><td>217</td><td>435</td><td>Extension for reply within third month</td><td>0.00</td></tr> <tr><td>118</td><td>1,360</td><td>218</td><td>680</td><td>Extension for reply within fourth month</td><td>0.00</td></tr> <tr><td>128</td><td>1,850</td><td>228</td><td>925</td><td>Extension for reply within fifth month</td><td>0.00</td></tr> <tr><td>119</td><td>300</td><td>219</td><td>150</td><td>Notice of Appeal</td><td>0.00</td></tr> <tr><td>120</td><td>300</td><td>220</td><td>150</td><td>Filing a brief in support of an appeal</td><td>0.00</td></tr> <tr><td>121</td><td>260</td><td>221</td><td>130</td><td>Request for oral hearing</td><td>0.00</td></tr> <tr><td>138</td><td>1,510</td><td>138</td><td>1,510</td><td>Petition to institute a public use proceeding</td><td>0.00</td></tr> <tr><td>140</td><td>110</td><td>240</td><td>55</td><td>Petition to revive - unavoidable</td><td>0.00</td></tr> <tr><td>141</td><td>1,210</td><td>241</td><td>605</td><td>Petition to revive - unintentional</td><td>0.00</td></tr> <tr><td>142</td><td>1,210</td><td>242</td><td>605</td><td>Utility issue fee (or reissue)</td><td>0.00</td></tr> <tr><td>143</td><td>430</td><td>243</td><td>215</td><td>Design issue fee</td><td>0.00</td></tr> <tr><td>144</td><td>580</td><td>244</td><td>290</td><td>Plant issue fee</td><td>0.00</td></tr> <tr><td>122</td><td>130</td><td>122</td><td>130</td><td>Petitions to the Commissioner</td><td>0.00</td></tr> <tr><td>123</td><td>50</td><td>123</td><td>50</td><td>Petitions related to provisional applications</td><td>0.00</td></tr> <tr><td>126</td><td>240</td><td>126</td><td>240</td><td>Submission of Information Disclosure Stmt</td><td>0.00</td></tr> <tr><td>581</td><td>40</td><td>581</td><td>40</td><td>Recording each patent assignment per property (times number of properties)</td><td>40.00</td></tr> <tr><td>146</td><td>760</td><td>246</td><td>380</td><td>Filing a submission after final rejection (37 CFR 1.129(a))</td><td>0.00</td></tr> <tr><td>149</td><td>760</td><td>249</td><td>380</td><td>For each additional invention to be examined (37 CFR 1.129(b))</td><td>0.00</td></tr> <tr><td colspan="5">Other fee (specify) _____</td><td>0.00</td></tr> <tr><td colspan="5">Other fee (specify) _____</td><td>0.00</td></tr> <tr> <td colspan="5" style="text-align: right;">*Reduced by Basic Filing Fee Paid</td> <td>SUBTOTAL (3) (\$)</td> </tr> <tr> <td colspan="5"></td> <td>40.00</td> </tr> </tbody> </table> | Large Fee Code  | Entity Fee (\$) | Small Fee Code   | Entity Fee (\$)   | Fee Description | Fee Paid | 105 | 130 | 205 | 65                 | Surcharge - late filing fee or oath | 0.00 | 127 | 50  | 227 | 25                | Surcharge - late provisional filing fee or cover sheet. | 0.00 | 139 | 130 | 139 | 130              | Non-English specification | 0.00 | 147 | 2,520 | 147 | 2,520              | For filing a request for reexamination | 0.00 | 112 | 920* | 112 | 920*                   | Requesting publication of SIR prior to Examiner action | 0.00              | 113 | 1,840* | 113 | 1,840* | Requesting publication of SIR after Examiner action | 0.00         | 115          | 110            | 215      | 55 | Extension for reply within first month | 0.00 | 116      | 380                | 216 | 190      | Extension for reply within second month | 0.00               | 117 | 870 | 217    | 435            | Extension for reply within third month | 0.00           | 118             | 1,360           | 218      | 680 | Extension for reply within fourth month | 0.00 | 128 | 1,850                  | 228 | 925 | Extension for reply within fifth month | 0.00 | 119 | 300                               | 219 | 150 | Notice of Appeal | 0.00 | 120 | 300                                   | 220 | 150 | Filing a brief in support of an appeal | 0.00 | 121 | 260  | 221 | 130 | Request for oral hearing | 0.00 | 138 | 1,510  | 138 | 1,510             | Petition to institute a public use proceeding | 0.00 | 140 | 110 | 240    | 55 | Petition to revive - unavoidable | 0.00 | 141 | 1,210 | 241 | 605 | Petition to revive - unintentional | 0.00 | 142 | 1,210 | 242 | 605 | Utility issue fee (or reissue) | 0.00 | 143 | 430 | 243 | 215 | Design issue fee | 0.00 | 144 | 580 | 244 | 290 | Plant issue fee | 0.00 | 122 | 130 | 122 | 130 | Petitions to the Commissioner | 0.00 | 123 | 50 | 123 | 50 | Petitions related to provisional applications | 0.00 | 126 | 240 | 126 | 240 | Submission of Information Disclosure Stmt | 0.00 | 581 | 40 | 581 | 40 | Recording each patent assignment per property (times number of properties) | 40.00 | 146 | 760 | 246 | 380 | Filing a submission after final rejection (37 CFR 1.129(a)) | 0.00 | 149 | 760 | 249 | 380 | For each additional invention to be examined (37 CFR 1.129(b)) | 0.00 | Other fee (specify) _____ |  |  |  |  | 0.00 | Other fee (specify) _____ |  |  |  |  | 0.00 | *Reduced by Basic Filing Fee Paid |  |  |  |  | SUBTOTAL (3) (\$) |  |  |  |  |  | 40.00 |
| Large Fee Code   | Entity Fee (\$)   | Small Fee Code  | Entity Fee (\$) | Fee Description  | Fee Paid          |                 |          |     |     |     |                    |                                     |      |     |     |     |                   |   |      |     |     |     |                  |                           |      |     |       |     |                    |  |      |     |      |     |                        |  |                   |     |        |     |        |   |              |              |                |          |    |  |      |          |                    |     |          |   |                    |     |     |        |                |  |                |                 |                 |          |     |   |      |     |                        |     |     |  |      |     |                                   |     |     |                  |      |     |                                       |     |     |  |      |     |  |     |     |                          |      |     |  |     |                   |   |      |     |     |        |    |                                  |      |     |       |     |     |                                    |      |     |       |     |     |                                |      |     |     |     |     |                  |      |     |     |     |     |                 |      |     |     |     |     |                               |      |     |    |     |    |   |      |     |     |     |     |   |      |     |    |     |    |  |       |     |     |     |     |   |      |     |     |     |     |  |      |                           |  |  |  |  |      |                           |  |  |  |  |      |                                   |  |  |  |  |                   |  |  |  |  |  |       |
| 105  | 130   | 205             | 65              | Surcharge - late filing fee or oath  | 0.00              |                 |          |     |     |     |                    |                                     |      |     |     |     |                   |   |      |     |     |     |                  |                           |      |     |       |     |                    |  |      |     |      |     |                        |  |                   |     |        |     |        |   |              |              |                |          |    |  |      |          |                    |     |          |   |                    |     |     |        |                |  |                |                 |                 |          |     |   |      |     |                        |     |     |  |      |     |                                   |     |     |                  |      |     |                                       |     |     |  |      |     |  |     |     |                          |      |     |  |     |                   |   |      |     |     |        |    |                                  |      |     |       |     |     |                                    |      |     |       |     |     |                                |      |     |     |     |     |                  |      |     |     |     |     |                 |      |     |     |     |     |                               |      |     |    |     |    |   |      |     |     |     |     |   |      |     |    |     |    |  |       |     |     |     |     |   |      |     |     |     |     |  |      |                           |  |  |  |  |      |                           |  |  |  |  |      |                                   |  |  |  |  |                   |  |  |  |  |  |       |
| 127  | 50  | 227             | 25              | Surcharge - late provisional filing fee or cover sheet.                    | 0.00              |                 |          |     |     |     |                    |                                     |      |     |     |     |                   |   |      |     |     |     |                  |                           |      |     |       |     |                    |  |      |     |      |     |                        |  |                   |     |        |     |        |   |              |              |                |          |    |  |      |          |                    |     |          |   |                    |     |     |        |                |  |                |                 |                 |          |     |   |      |     |                        |     |     |  |      |     |                                   |     |     |                  |      |     |                                       |     |     |  |      |     |  |     |     |                          |      |     |  |     |                   |   |      |     |     |        |    |                                  |      |     |       |     |     |                                    |      |     |       |     |     |                                |      |     |     |     |     |                  |      |     |     |     |     |                 |      |     |     |     |     |                               |      |     |    |     |    |   |      |     |     |     |     |   |      |     |    |     |    |  |       |     |     |     |     |   |      |     |     |     |     |  |      |                           |  |  |  |  |      |                           |  |  |  |  |      |                                   |  |  |  |  |                   |  |  |  |  |  |       |
| 139  | 130   | 139             | 130             | Non-English specification  | 0.00              |                 |          |     |     |     |                    |                                     |      |     |     |     |                   |   |      |     |     |     |                  |                           |      |     |       |     |                    |  |      |     |      |     |                        |  |                   |     |        |     |        |   |              |              |                |          |    |  |      |          |                    |     |          |   |                    |     |     |        |                |  |                |                 |                 |          |     |   |      |     |                        |     |     |  |      |     |                                   |     |     |                  |      |     |                                       |     |     |  |      |     |  |     |     |                          |      |     |  |     |                   |   |      |     |     |        |    |                                  |      |     |       |     |     |                                    |      |     |       |     |     |                                |      |     |     |     |     |                  |      |     |     |     |     |                 |      |     |     |     |     |                               |      |     |    |     |    |   |      |     |     |     |     |   |      |     |    |     |    |  |       |     |     |     |     |   |      |     |     |     |     |  |      |                           |  |  |  |  |      |                           |  |  |  |  |      |                                   |  |  |  |  |                   |  |  |  |  |  |       |
| 147  | 2,520   | 147             | 2,520           | For filing a request for reexamination                                     | 0.00              |                 |          |     |     |     |                    |                                     |      |     |     |     |                   |   |      |     |     |     |                  |                           |      |     |       |     |                    |  |      |     |      |     |                        |  |                   |     |        |     |        |   |              |              |                |          |    |  |      |          |                    |     |          |   |                    |     |     |        |                |  |                |                 |                 |          |     |   |      |     |                        |     |     |  |      |     |                                   |     |     |                  |      |     |                                       |     |     |  |      |     |  |     |     |                          |      |     |  |     |                   |   |      |     |     |        |    |                                  |      |     |       |     |     |                                    |      |     |       |     |     |                                |      |     |     |     |     |                  |      |     |     |     |     |                 |      |     |     |     |     |                               |      |     |    |     |    |   |      |     |     |     |     |   |      |     |    |     |    |  |       |     |     |     |     |   |      |     |     |     |     |  |      |                           |  |  |  |  |      |                           |  |  |  |  |      |                                   |  |  |  |  |                   |  |  |  |  |  |       |
| 112  | 920*  | 112             | 920*            | Requesting publication of SIR prior to Examiner action                     | 0.00              |                 |          |     |     |     |                    |                                     |      |     |     |     |                   |   |      |     |     |     |                  |                           |      |     |       |     |                    |  |      |     |      |     |                        |  |                   |     |        |     |        |   |              |              |                |          |    |  |      |          |                    |     |          |   |                    |     |     |        |                |  |                |                 |                 |          |     |   |      |     |                        |     |     |  |      |     |                                   |     |     |                  |      |     |                                       |     |     |  |      |     |  |     |     |                          |      |     |  |     |                   |   |      |     |     |        |    |                                  |      |     |       |     |     |                                    |      |     |       |     |     |                                |      |     |     |     |     |                  |      |     |     |     |     |                 |      |     |     |     |     |                               |      |     |    |     |    |   |      |     |     |     |     |   |      |     |    |     |    |  |       |     |     |     |     |   |      |     |     |     |     |  |      |                           |  |  |  |  |      |                           |  |  |  |  |      |                                   |  |  |  |  |                   |  |  |  |  |  |       |
| 113  | 1,840*  | 113             | 1,840*          | Requesting publication of SIR after Examiner action                        | 0.00              |                 |          |     |     |     |                    |                                     |      |     |     |     |                   |   |      |     |     |     |                  |                           |      |     |       |     |                    |  |      |     |      |     |                        |  |                   |     |        |     |        |   |              |              |                |          |    |  |      |          |                    |     |          |   |                    |     |     |        |                |  |                |                 |                 |          |     |   |      |     |                        |     |     |  |      |     |                                   |     |     |                  |      |     |                                       |     |     |  |      |     |  |     |     |                          |      |     |  |     |                   |   |      |     |     |        |    |                                  |      |     |       |     |     |                                    |      |     |       |     |     |                                |      |     |     |     |     |                  |      |     |     |     |     |                 |      |     |     |     |     |                               |      |     |    |     |    |   |      |     |     |     |     |   |      |     |    |     |    |  |       |     |     |     |     |   |      |     |     |     |     |  |      |                           |  |  |  |  |      |                           |  |  |  |  |      |                                   |  |  |  |  |                   |  |  |  |  |  |       |
| 115  | 110   | 215             | 55              | Extension for reply within first month                                     | 0.00              |                 |          |     |     |     |                    |                                     |      |     |     |     |                   |   |      |     |     |     |                  |                           |      |     |       |     |                    |  |      |     |      |     |                        |  |                   |     |        |     |        |   |              |              |                |          |    |  |      |          |                    |     |          |   |                    |     |     |        |                |  |                |                 |                 |          |     |   |      |     |                        |     |     |  |      |     |                                   |     |     |                  |      |     |                                       |     |     |  |      |     |  |     |     |                          |      |     |  |     |                   |   |      |     |     |        |    |                                  |      |     |       |     |     |                                    |      |     |       |     |     |                                |      |     |     |     |     |                  |      |     |     |     |     |                 |      |     |     |     |     |                               |      |     |    |     |    |   |      |     |     |     |     |   |      |     |    |     |    |  |       |     |     |     |     |   |      |     |     |     |     |  |      |                           |  |  |  |  |      |                           |  |  |  |  |      |                                   |  |  |  |  |                   |  |  |  |  |  |       |
| 116  | 380   | 216             | 190             | Extension for reply within second month                                    | 0.00              |                 |          |     |     |     |                    |                                     |      |     |     |     |                   |   |      |     |     |     |                  |                           |      |     |       |     |                    |  |      |     |      |     |                        |  |                   |     |        |     |        |   |              |              |                |          |    |  |      |          |                    |     |          |   |                    |     |     |        |                |  |                |                 |                 |          |     |   |      |     |                        |     |     |  |      |     |                                   |     |     |                  |      |     |                                       |     |     |  |      |     |  |     |     |                          |      |     |  |     |                   |   |      |     |     |        |    |                                  |      |     |       |     |     |                                    |      |     |       |     |     |                                |      |     |     |     |     |                  |      |     |     |     |     |                 |      |     |     |     |     |                               |      |     |    |     |    |   |      |     |     |     |     |   |      |     |    |     |    |  |       |     |     |     |     |   |      |     |     |     |     |  |      |                           |  |  |  |  |      |                           |  |  |  |  |      |                                   |  |  |  |  |                   |  |  |  |  |  |       |
| 117  | 870   | 217             | 435             | Extension for reply within third month                                     | 0.00              |                 |          |     |     |     |                    |                                     |      |     |     |     |                   |   |      |     |     |     |                  |                           |      |     |       |     |                    |  |      |     |      |     |                        |  |                   |     |        |     |        |   |              |              |                |          |    |  |      |          |                    |     |          |   |                    |     |     |        |                |  |                |                 |                 |          |     |   |      |     |                        |     |     |  |      |     |                                   |     |     |                  |      |     |                                       |     |     |  |      |     |  |     |     |                          |      |     |  |     |                   |   |      |     |     |        |    |                                  |      |     |       |     |     |                                    |      |     |       |     |     |                                |      |     |     |     |     |                  |      |     |     |     |     |                 |      |     |     |     |     |                               |      |     |    |     |    |   |      |     |     |     |     |   |      |     |    |     |    |  |       |     |     |     |     |   |      |     |     |     |     |  |      |                           |  |  |  |  |      |                           |  |  |  |  |      |                                   |  |  |  |  |                   |  |  |  |  |  |       |
| 118  | 1,360   | 218             | 680             | Extension for reply within fourth month                                    | 0.00              |                 |          |     |     |     |                    |                                     |      |     |     |     |                   |   |      |     |     |     |                  |                           |      |     |       |     |                    |  |      |     |      |     |                        |  |                   |     |        |     |        |   |              |              |                |          |    |  |      |          |                    |     |          |   |                    |     |     |        |                |  |                |                 |                 |          |     |   |      |     |                        |     |     |  |      |     |                                   |     |     |                  |      |     |                                       |     |     |  |      |     |  |     |     |                          |      |     |  |     |                   |   |      |     |     |        |    |                                  |      |     |       |     |     |                                    |      |     |       |     |     |                                |      |     |     |     |     |                  |      |     |     |     |     |                 |      |     |     |     |     |                               |      |     |    |     |    |   |      |     |     |     |     |   |      |     |    |     |    |  |       |     |     |     |     |   |      |     |     |     |     |  |      |                           |  |  |  |  |      |                           |  |  |  |  |      |                                   |  |  |  |  |                   |  |  |  |  |  |       |
| 128  | 1,850   | 228             | 925             | Extension for reply within fifth month                                     | 0.00              |                 |          |     |     |     |                    |                                     |      |     |     |     |                   |   |      |     |     |     |                  |                           |      |     |       |     |                    |  |      |     |      |     |                        |  |                   |     |        |     |        |   |              |              |                |          |    |  |      |          |                    |     |          |   |                    |     |     |        |                |  |                |                 |                 |          |     |   |      |     |                        |     |     |  |      |     |                                   |     |     |                  |      |     |                                       |     |     |  |      |     |  |     |     |                          |      |     |  |     |                   |   |      |     |     |        |    |                                  |      |     |       |     |     |                                    |      |     |       |     |     |                                |      |     |     |     |     |                  |      |     |     |     |     |                 |      |     |     |     |     |                               |      |     |    |     |    |   |      |     |     |     |     |   |      |     |    |     |    |  |       |     |     |     |     |   |      |     |     |     |     |  |      |                           |  |  |  |  |      |                           |  |  |  |  |      |                                   |  |  |  |  |                   |  |  |  |  |  |       |
| 119  | 300   | 219             | 150             | Notice of Appeal   | 0.00              |                 |          |     |     |     |                    |                                     |      |     |     |     |                   |   |      |     |     |     |                  |                           |      |     |       |     |                    |  |      |     |      |     |                        |  |                   |     |        |     |        |   |              |              |                |          |    |  |      |          |                    |     |          |   |                    |     |     |        |                |  |                |                 |                 |          |     |   |      |     |                        |     |     |  |      |     |                                   |     |     |                  |      |     |                                       |     |     |  |      |     |  |     |     |                          |      |     |  |     |                   |   |      |     |     |        |    |                                  |      |     |       |     |     |                                    |      |     |       |     |     |                                |      |     |     |     |     |                  |      |     |     |     |     |                 |      |     |     |     |     |                               |      |     |    |     |    |   |      |     |     |     |     |   |      |     |    |     |    |  |       |     |     |     |     |   |      |     |     |     |     |  |      |                           |  |  |  |  |      |                           |  |  |  |  |      |                                   |  |  |  |  |                   |  |  |  |  |  |       |
| 120  | 300   | 220             | 150             | Filing a brief in support of an appeal                                     | 0.00              |                 |          |     |     |     |                    |                                     |      |     |     |     |                   |   |      |     |     |     |                  |                           |      |     |       |     |                    |  |      |     |      |     |                        |  |                   |     |        |     |        |   |              |              |                |          |    |  |      |          |                    |     |          |   |                    |     |     |        |                |  |                |                 |                 |          |     |   |      |     |                        |     |     |  |      |     |                                   |     |     |                  |      |     |                                       |     |     |  |      |     |  |     |     |                          |      |     |  |     |                   |   |      |     |     |        |    |                                  |      |     |       |     |     |                                    |      |     |       |     |     |                                |      |     |     |     |     |                  |      |     |     |     |     |                 |      |     |     |     |     |                               |      |     |    |     |    |   |      |     |     |     |     |   |      |     |    |     |    |  |       |     |     |     |     |   |      |     |     |     |     |  |      |                           |  |  |  |  |      |                           |  |  |  |  |      |                                   |  |  |  |  |                   |  |  |  |  |  |       |
| 121  | 260   | 221             | 130             | Request for oral hearing   | 0.00              |                 |          |     |     |     |                    |                                     |      |     |     |     |                   |   |      |     |     |     |                  |                           |      |     |       |     |                    |  |      |     |      |     |                        |  |                   |     |        |     |        |   |              |              |                |          |    |  |      |          |                    |     |          |   |                    |     |     |        |                |  |                |                 |                 |          |     |   |      |     |                        |     |     |  |      |     |                                   |     |     |                  |      |     |                                       |     |     |  |      |     |  |     |     |                          |      |     |  |     |                   |   |      |     |     |        |    |                                  |      |     |       |     |     |                                    |      |     |       |     |     |                                |      |     |     |     |     |                  |      |     |     |     |     |                 |      |     |     |     |     |                               |      |     |    |     |    |   |      |     |     |     |     |   |      |     |    |     |    |  |       |     |     |     |     |   |      |     |     |     |     |  |      |                           |  |  |  |  |      |                           |  |  |  |  |      |                                   |  |  |  |  |                   |  |  |  |  |  |       |
| 138  | 1,510   | 138             | 1,510           | Petition to institute a public use proceeding                              | 0.00              |                 |          |     |     |     |                    |                                     |      |     |     |     |                   |   |      |     |     |     |                  |                           |      |     |       |     |                    |  |      |     |      |     |                        |  |                   |     |        |     |        |   |              |              |                |          |    |  |      |          |                    |     |          |   |                    |     |     |        |                |  |                |                 |                 |          |     |   |      |     |                        |     |     |  |      |     |                                   |     |     |                  |      |     |                                       |     |     |  |      |     |  |     |     |                          |      |     |  |     |                   |   |      |     |     |        |    |                                  |      |     |       |     |     |                                    |      |     |       |     |     |                                |      |     |     |     |     |                  |      |     |     |     |     |                 |      |     |     |     |     |                               |      |     |    |     |    |   |      |     |     |     |     |   |      |     |    |     |    |  |       |     |     |     |     |   |      |     |     |     |     |  |      |                           |  |  |  |  |      |                           |  |  |  |  |      |                                   |  |  |  |  |                   |  |  |  |  |  |       |
| 140  | 110   | 240             | 55              | Petition to revive - unavoidable   | 0.00              |                 |          |     |     |     |                    |                                     |      |     |     |     |                   |   |      |     |     |     |                  |                           |      |     |       |     |                    |  |      |     |      |     |                        |  |                   |     |        |     |        |   |              |              |                |          |    |  |      |          |                    |     |          |   |                    |     |     |        |                |  |                |                 |                 |          |     |   |      |     |                        |     |     |  |      |     |                                   |     |     |                  |      |     |                                       |     |     |  |      |     |  |     |     |                          |      |     |  |     |                   |   |      |     |     |        |    |                                  |      |     |       |     |     |                                    |      |     |       |     |     |                                |      |     |     |     |     |                  |      |     |     |     |     |                 |      |     |     |     |     |                               |      |     |    |     |    |   |      |     |     |     |     |   |      |     |    |     |    |  |       |     |     |     |     |   |      |     |     |     |     |  |      |                           |  |  |  |  |      |                           |  |  |  |  |      |                                   |  |  |  |  |                   |  |  |  |  |  |       |
| 141  | 1,210   | 241             | 605             | Petition to revive - unintentional   | 0.00              |                 |          |     |     |     |                    |                                     |      |     |     |     |                   |   |      |     |     |     |                  |                           |      |     |       |     |                    |  |      |     |      |     |                        |  |                   |     |        |     |        |   |              |              |                |          |    |  |      |          |                    |     |          |   |                    |     |     |        |                |  |                |                 |                 |          |     |   |      |     |                        |     |     |  |      |     |                                   |     |     |                  |      |     |                                       |     |     |  |      |     |  |     |     |                          |      |     |  |     |                   |   |      |     |     |        |    |                                  |      |     |       |     |     |                                    |      |     |       |     |     |                                |      |     |     |     |     |                  |      |     |     |     |     |                 |      |     |     |     |     |                               |      |     |    |     |    |   |      |     |     |     |     |   |      |     |    |     |    |  |       |     |     |     |     |   |      |     |     |     |     |  |      |                           |  |  |  |  |      |                           |  |  |  |  |      |                                   |  |  |  |  |                   |  |  |  |  |  |       |
| 142  | 1,210   | 242             | 605             | Utility issue fee (or reissue)   | 0.00              |                 |          |     |     |     |                    |                                     |      |     |     |     |                   |   |      |     |     |     |                  |                           |      |     |       |     |                    |  |      |     |      |     |                        |  |                   |     |        |     |        |   |              |              |                |          |    |  |      |          |                    |     |          |   |                    |     |     |        |                |  |                |                 |                 |          |     |   |      |     |                        |     |     |  |      |     |                                   |     |     |                  |      |     |                                       |     |     |  |      |     |  |     |     |                          |      |     |  |     |                   |   |      |     |     |        |    |                                  |      |     |       |     |     |                                    |      |     |       |     |     |                                |      |     |     |     |     |                  |      |     |     |     |     |                 |      |     |     |     |     |                               |      |     |    |     |    |   |      |     |     |     |     |   |      |     |    |     |    |  |       |     |     |     |     |   |      |     |     |     |     |  |      |                           |  |  |  |  |      |                           |  |  |  |  |      |                                   |  |  |  |  |                   |  |  |  |  |  |       |
| 143  | 430   | 243             | 215             | Design issue fee   | 0.00              |                 |          |     |     |     |                    |                                     |      |     |     |     |                   |   |      |     |     |     |                  |                           |      |     |       |     |                    |  |      |     |      |     |                        |  |                   |     |        |     |        |   |              |              |                |          |    |  |      |          |                    |     |          |   |                    |     |     |        |                |  |                |                 |                 |          |     |   |      |     |                        |     |     |  |      |     |                                   |     |     |                  |      |     |                                       |     |     |  |      |     |  |     |     |                          |      |     |  |     |                   |   |      |     |     |        |    |                                  |      |     |       |     |     |                                    |      |     |       |     |     |                                |      |     |     |     |     |                  |      |     |     |     |     |                 |      |     |     |     |     |                               |      |     |    |     |    |   |      |     |     |     |     |   |      |     |    |     |    |  |       |     |     |     |     |   |      |     |     |     |     |  |      |                           |  |  |  |  |      |                           |  |  |  |  |      |                                   |  |  |  |  |                   |  |  |  |  |  |       |
| 144  | 580   | 244             | 290             | Plant issue fee  | 0.00              |                 |          |     |     |     |                    |                                     |      |     |     |     |                   |   |      |     |     |     |                  |                           |      |     |       |     |                    |  |      |     |      |     |                        |  |                   |     |        |     |        |   |              |              |                |          |    |  |      |          |                    |     |          |   |                    |     |     |        |                |  |                |                 |                 |          |     |   |      |     |                        |     |     |  |      |     |                                   |     |     |                  |      |     |                                       |     |     |  |      |     |  |     |     |                          |      |     |  |     |                   |   |      |     |     |        |    |                                  |      |     |       |     |     |                                    |      |     |       |     |     |                                |      |     |     |     |     |                  |      |     |     |     |     |                 |      |     |     |     |     |                               |      |     |    |     |    |   |      |     |     |     |     |   |      |     |    |     |    |  |       |     |     |     |     |   |      |     |     |     |     |  |      |                           |  |  |  |  |      |                           |  |  |  |  |      |                                   |  |  |  |  |                   |  |  |  |  |  |       |
| 122  | 130   | 122             | 130             | Petitions to the Commissioner  | 0.00              |                 |          |     |     |     |                    |                                     |      |     |     |     |                   |   |      |     |     |     |                  |                           |      |     |       |     |                    |  |      |     |      |     |                        |  |                   |     |        |     |        |   |              |              |                |          |    |  |      |          |                    |     |          |   |                    |     |     |        |                |  |                |                 |                 |          |     |   |      |     |                        |     |     |  |      |     |                                   |     |     |                  |      |     |                                       |     |     |  |      |     |  |     |     |                          |      |     |  |     |                   |   |      |     |     |        |    |                                  |      |     |       |     |     |                                    |      |     |       |     |     |                                |      |     |     |     |     |                  |      |     |     |     |     |                 |      |     |     |     |     |                               |      |     |    |     |    |   |      |     |     |     |     |   |      |     |    |     |    |  |       |     |     |     |     |   |      |     |     |     |     |  |      |                           |  |  |  |  |      |                           |  |  |  |  |      |                                   |  |  |  |  |                   |  |  |  |  |  |       |
| 123  | 50  | 123             | 50              | Petitions related to provisional applications                              | 0.00              |                 |          |     |     |     |                    |                                     |      |     |     |     |                   |   |      |     |     |     |                  |                           |      |     |       |     |                    |  |      |     |      |     |                        |  |                   |     |        |     |        |   |              |              |                |          |    |  |      |          |                    |     |          |   |                    |     |     |        |                |  |                |                 |                 |          |     |   |      |     |                        |     |     |  |      |     |                                   |     |     |                  |      |     |                                       |     |     |  |      |     |  |     |     |                          |      |     |  |     |                   |   |      |     |     |        |    |                                  |      |     |       |     |     |                                    |      |     |       |     |     |                                |      |     |     |     |     |                  |      |     |     |     |     |                 |      |     |     |     |     |                               |      |     |    |     |    |   |      |     |     |     |     |   |      |     |    |     |    |  |       |     |     |     |     |   |      |     |     |     |     |  |      |                           |  |  |  |  |      |                           |  |  |  |  |      |                                   |  |  |  |  |                   |  |  |  |  |  |       |
| 126  | 240   | 126             | 240             | Submission of Information Disclosure Stmt                                  | 0.00              |                 |          |     |     |     |                    |                                     |      |     |     |     |                   |   |      |     |     |     |                  |                           |      |     |       |     |                    |  |      |     |      |     |                        |  |                   |     |        |     |        |   |              |              |                |          |    |  |      |          |                    |     |          |   |                    |     |     |        |                |  |                |                 |                 |          |     |   |      |     |                        |     |     |  |      |     |                                   |     |     |                  |      |     |                                       |     |     |  |      |     |  |     |     |                          |      |     |  |     |                   |   |      |     |     |        |    |                                  |      |     |       |     |     |                                    |      |     |       |     |     |                                |      |     |     |     |     |                  |      |     |     |     |     |                 |      |     |     |     |     |                               |      |     |    |     |    |   |      |     |     |     |     |   |      |     |    |     |    |  |       |     |     |     |     |   |      |     |     |     |     |  |      |                           |  |  |  |  |      |                           |  |  |  |  |      |                                   |  |  |  |  |                   |  |  |  |  |  |       |
| 581  | 40  | 581             | 40              | Recording each patent assignment per property (times number of properties) | 40.00             |                 |          |     |     |     |                    |                                     |      |     |     |     |                   |   |      |     |     |     |                  |                           |      |     |       |     |                    |  |      |     |      |     |                        |  |                   |     |        |     |        |   |              |              |                |          |    |  |      |          |                    |     |          |   |                    |     |     |        |                |  |                |                 |                 |          |     |   |      |     |                        |     |     |  |      |     |                                   |     |     |                  |      |     |                                       |     |     |  |      |     |  |     |     |                          |      |     |  |     |                   |   |      |     |     |        |    |                                  |      |     |       |     |     |                                    |      |     |       |     |     |                                |      |     |     |     |     |                  |      |     |     |     |     |                 |      |     |     |     |     |                               |      |     |    |     |    |   |      |     |     |     |     |   |      |     |    |     |    |  |       |     |     |     |     |   |      |     |     |     |     |  |      |                           |  |  |  |  |      |                           |  |  |  |  |      |                                   |  |  |  |  |                   |  |  |  |  |  |       |
| 146  | 760   | 246             | 380             | Filing a submission after final rejection (37 CFR 1.129(a))                | 0.00              |                 |          |     |     |     |                    |                                     |      |     |     |     |                   |   |      |     |     |     |                  |                           |      |     |       |     |                    |  |      |     |      |     |                        |  |                   |     |        |     |        |   |              |              |                |          |    |  |      |          |                    |     |          |   |                    |     |     |        |                |  |                |                 |                 |          |     |   |      |     |                        |     |     |  |      |     |                                   |     |     |                  |      |     |                                       |     |     |  |      |     |  |     |     |                          |      |     |  |     |                   |   |      |     |     |        |    |                                  |      |     |       |     |     |                                    |      |     |       |     |     |                                |      |     |     |     |     |                  |      |     |     |     |     |                 |      |     |     |     |     |                               |      |     |    |     |    |   |      |     |     |     |     |   |      |     |    |     |    |  |       |     |     |     |     |   |      |     |     |     |     |  |      |                           |  |  |  |  |      |                           |  |  |  |  |      |                                   |  |  |  |  |                   |  |  |  |  |  |       |
| 149  | 760   | 249             | 380             | For each additional invention to be examined (37 CFR 1.129(b))             | 0.00              |                 |          |     |     |     |                    |                                     |      |     |     |     |                   |   |      |     |     |     |                  |                           |      |     |       |     |                    |  |      |     |      |     |                        |  |                   |     |        |     |        |   |              |              |                |          |    |  |      |          |                    |     |          |   |                    |     |     |        |                |  |                |                 |                 |          |     |   |      |     |                        |     |     |  |      |     |                                   |     |     |                  |      |     |                                       |     |     |  |      |     |  |     |     |                          |      |     |  |     |                   |   |      |     |     |        |    |                                  |      |     |       |     |     |                                    |      |     |       |     |     |                                |      |     |     |     |     |                  |      |     |     |     |     |                 |      |     |     |     |     |                               |      |     |    |     |    |   |      |     |     |     |     |   |      |     |    |     |    |  |       |     |     |     |     |   |      |     |     |     |     |  |      |                           |  |  |  |  |      |                           |  |  |  |  |      |                                   |  |  |  |  |                   |  |  |  |  |  |       |
| Other fee (specify) _____  |   |                 |                 |  | 0.00              |                 |          |     |     |     |                    |                                     |      |     |     |     |                   |   |      |     |     |     |                  |                           |      |     |       |     |                    |  |      |     |      |     |                        |  |                   |     |        |     |        |   |              |              |                |          |    |  |      |          |                    |     |          |   |                    |     |     |        |                |  |                |                 |                 |          |     |   |      |     |                        |     |     |  |      |     |                                   |     |     |                  |      |     |                                       |     |     |  |      |     |  |     |     |                          |      |     |  |     |                   |   |      |     |     |        |    |                                  |      |     |       |     |     |                                    |      |     |       |     |     |                                |      |     |     |     |     |                  |      |     |     |     |     |                 |      |     |     |     |     |                               |      |     |    |     |    |   |      |     |     |     |     |   |      |     |    |     |    |  |       |     |     |     |     |   |      |     |     |     |     |  |      |                           |  |  |  |  |      |                           |  |  |  |  |      |                                   |  |  |  |  |                   |  |  |  |  |  |       |
| Other fee (specify) _____  |   |                 |                 |  | 0.00              |                 |          |     |     |     |                    |                                     |      |     |     |     |                   |   |      |     |     |     |                  |                           |      |     |       |     |                    |  |      |     |      |     |                        |  |                   |     |        |     |        |   |              |              |                |          |    |  |      |          |                    |     |          |   |                    |     |     |        |                |  |                |                 |                 |          |     |   |      |     |                        |     |     |  |      |     |                                   |     |     |                  |      |     |                                       |     |     |  |      |     |  |     |     |                          |      |     |  |     |                   |   |      |     |     |        |    |                                  |      |     |       |     |     |                                    |      |     |       |     |     |                                |      |     |     |     |     |                  |      |     |     |     |     |                 |      |     |     |     |     |                               |      |     |    |     |    |   |      |     |     |     |     |   |      |     |    |     |    |  |       |     |     |     |     |   |      |     |     |     |     |  |      |                           |  |  |  |  |      |                           |  |  |  |  |      |                                   |  |  |  |  |                   |  |  |  |  |  |       |
| *Reduced by Basic Filing Fee Paid  |   |                 |                 |  | SUBTOTAL (3) (\$) |                 |          |     |     |     |                    |                                     |      |     |     |     |                   |   |      |     |     |     |                  |                           |      |     |       |     |                    |  |      |     |      |     |                        |  |                   |     |        |     |        |   |              |              |                |          |    |  |      |          |                    |     |          |   |                    |     |     |        |                |  |                |                 |                 |          |     |   |      |     |                        |     |     |  |      |     |                                   |     |     |                  |      |     |                                       |     |     |  |      |     |  |     |     |                          |      |     |  |     |                   |   |      |     |     |        |    |                                  |      |     |       |     |     |                                    |      |     |       |     |     |                                |      |     |     |     |     |                  |      |     |     |     |     |                 |      |     |     |     |     |                               |      |     |    |     |    |   |      |     |     |     |     |   |      |     |    |     |    |  |       |     |     |     |     |   |      |     |     |     |     |  |      |                           |  |  |  |  |      |                           |  |  |  |  |      |                                   |  |  |  |  |                   |  |  |  |  |  |       |
|  |   |                 |                 |  | 40.00             |                 |          |     |     |     |                    |                                     |      |     |     |     |                   |   |      |     |     |     |                  |                           |      |     |       |     |                    |  |      |     |      |     |                        |  |                   |     |        |     |        |   |              |              |                |          |    |  |      |          |                    |     |          |   |                    |     |     |        |                |  |                |                 |                 |          |     |   |      |     |                        |     |     |  |      |     |                                   |     |     |                  |      |     |                                       |     |     |  |      |     |  |     |     |                          |      |     |  |     |                   |   |      |     |     |        |    |                                  |      |     |       |     |     |                                    |      |     |       |     |     |                                |      |     |     |     |     |                  |      |     |     |     |     |                 |      |     |     |     |     |                               |      |     |    |     |    |   |      |     |     |     |     |   |      |     |    |     |    |  |       |     |     |     |     |   |      |     |     |     |     |  |      |                           |  |  |  |  |      |                           |  |  |  |  |      |                                   |  |  |  |  |                   |  |  |  |  |  |       |
| <p style="text-align: center; font-weight: bold;">FEE CALCULATION</p> <p>1. BASIC FILING FEE</p> <table border="1" style="width: 100%; border-collapse: collapse; font-size: 0.8em;"> <thead> <tr> <th>Large Fee Code</th> <th>Entity Fee (\$)</th> <th>Small Fee Code</th> <th>Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>101</td><td>760</td><td>201</td><td>380</td><td>Utility filing fee</td><td>690.00</td></tr> <tr><td>106</td><td>310</td><td>206</td><td>155</td><td>Design filing fee</td><td></td></tr> <tr><td>107</td><td>480</td><td>207</td><td>240</td><td>Plant filing fee</td><td></td></tr> <tr><td>108</td><td>760</td><td>208</td><td>380</td><td>Reissue filing fee</td><td></td></tr> <tr><td>114</td><td>150</td><td>214</td><td>75</td><td>Provisional filing fee</td><td></td></tr> <tr> <td colspan="5" style="text-align: right;">SUBTOTAL (1) (\$)</td> <td>690.00</td> </tr> </tbody> </table> <p>2. EXTRA CLAIM FEES</p> <table border="1" style="width: 100%; border-collapse: collapse; font-size: 0.8em;"> <thead> <tr> <th>Total Claims</th> <th>Extra Claims</th> <th>Fee from below</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>37</td> <td>-20** = 17</td> <td>X 18</td> <td>= 306.00</td> </tr> <tr> <td>Independent Claims</td> <td>3</td> <td>-3** = 0</td> <td>X = 0.00</td> </tr> <tr> <td>Multiple Dependent</td> <td></td> <td></td> <td>= 0.00</td> </tr> </tbody> </table> <p>**or number previously paid, if greater; For Reissues, see below</p> <table border="1" style="width: 100%; border-collapse: collapse; font-size: 0.8em;"> <thead> <tr> <th>Large Fee Code</th> <th>Entity Fee (\$)</th> <th>Small Fee Code</th> <th>Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>103</td><td>18</td><td>203</td><td>9</td><td>Claims in excess of 20</td><td></td></tr> <tr><td>102</td><td>78</td><td>202</td><td>39</td><td>Independent claims in excess of 3</td><td></td></tr> <tr><td>104</td><td>260</td><td>204</td><td>130</td><td>Multiple dependent claim, if not paid</td><td></td></tr> <tr><td>109</td><td>78</td><td>209</td><td>39</td><td>** Reissue independent claims over original patent</td><td></td></tr> <tr><td>110</td><td>18</td><td>210</td><td>9</td><td>** Reissue claims in excess of 20 and over original patent</td><td></td></tr> <tr> <td colspan="5" style="text-align: right;">SUBTOTAL (2) (\$)</td> <td>306.00</td> </tr> </tbody> </table> | Large Fee Code  | Entity Fee (\$) | Small Fee Code  | Entity Fee (\$)  | Fee Description   | Fee Paid        | 101      | 760 | 201 | 380 | Utility filing fee | 690.00                              | 106  | 310 | 206 | 155 | Design filing fee |   | 107  | 480 | 207 | 240 | Plant filing fee |                           | 108  | 760 | 208   | 380 | Reissue filing fee |  | 114  | 150 | 214  | 75  | Provisional filing fee |  | SUBTOTAL (1) (\$) |     |        |     |        | 690.00  | Total Claims | Extra Claims | Fee from below | Fee Paid | 37 | -20** = 17                             | X 18 | = 306.00 | Independent Claims | 3   | -3** = 0 | X = 0.00                                | Multiple Dependent |     |     | = 0.00 | Large Fee Code | Entity Fee (\$)                        | Small Fee Code | Entity Fee (\$) | Fee Description | Fee Paid | 103 | 18                                      | 203  | 9   | Claims in excess of 20 |     | 102 | 78                                     | 202  | 39  | Independent claims in excess of 3 |     | 104 | 260              | 204  | 130 | Multiple dependent claim, if not paid |     | 109 | 78                                     | 209  | 39  | ** Reissue independent claims over original patent |     | 110 | 18                       | 210  | 9   | ** Reissue claims in excess of 20 and over original patent |     | SUBTOTAL (2) (\$) |   |      |     |     | 306.00 |    |                                  |      |     |       |     |     |                                    |      |     |       |     |     |                                |      |     |     |     |     |                  |      |     |     |     |     |                 |      |     |     |     |     |                               |      |     |    |     |    |   |      |     |     |     |     |   |      |     |    |     |    |  |       |     |     |     |     |   |      |     |     |     |     |  |      |                           |  |  |  |  |      |                           |  |  |  |  |      |                                   |  |  |  |  |                   |  |  |  |  |  |       |
| Large Fee Code   | Entity Fee (\$)   | Small Fee Code  | Entity Fee (\$) | Fee Description  | Fee Paid          |                 |          |     |     |     |                    |                                     |      |     |     |     |                   |   |      |     |     |     |                  |                           |      |     |       |     |                    |  |      |     |      |     |                        |  |                   |     |        |     |        |   |              |              |                |          |    |  |      |          |                    |     |          |   |                    |     |     |        |                |  |                |                 |                 |          |     |   |      |     |                        |     |     |  |      |     |                                   |     |     |                  |      |     |                                       |     |     |  |      |     |  |     |     |                          |      |     |  |     |                   |   |      |     |     |        |    |                                  |      |     |       |     |     |                                    |      |     |       |     |     |                                |      |     |     |     |     |                  |      |     |     |     |     |                 |      |     |     |     |     |                               |      |     |    |     |    |   |      |     |     |     |     |   |      |     |    |     |    |  |       |     |     |     |     |   |      |     |     |     |     |  |      |                           |  |  |  |  |      |                           |  |  |  |  |      |                                   |  |  |  |  |                   |  |  |  |  |  |       |
| 101  | 760   | 201             | 380             | Utility filing fee   | 690.00            |                 |          |     |     |     |                    |                                     |      |     |     |     |                   |   |      |     |     |     |                  |                           |      |     |       |     |                    |  |      |     |      |     |                        |  |                   |     |        |     |        |   |              |              |                |          |    |  |      |          |                    |     |          |   |                    |     |     |        |                |  |                |                 |                 |          |     |   |      |     |                        |     |     |  |      |     |                                   |     |     |                  |      |     |                                       |     |     |  |      |     |  |     |     |                          |      |     |  |     |                   |   |      |     |     |        |    |                                  |      |     |       |     |     |                                    |      |     |       |     |     |                                |      |     |     |     |     |                  |      |     |     |     |     |                 |      |     |     |     |     |                               |      |     |    |     |    |   |      |     |     |     |     |   |      |     |    |     |    |  |       |     |     |     |     |   |      |     |     |     |     |  |      |                           |  |  |  |  |      |                           |  |  |  |  |      |                                   |  |  |  |  |                   |  |  |  |  |  |       |
| 106  | 310   | 206             | 155             | Design filing fee  |                   |                 |          |     |     |     |                    |                                     |      |     |     |     |                   |   |      |     |     |     |                  |                           |      |     |       |     |                    |  |      |     |      |     |                        |  |                   |     |        |     |        |   |              |              |                |          |    |  |      |          |                    |     |          |   |                    |     |     |        |                |  |                |                 |                 |          |     |   |      |     |                        |     |     |  |      |     |                                   |     |     |                  |      |     |                                       |     |     |  |      |     |  |     |     |                          |      |     |  |     |                   |   |      |     |     |        |    |                                  |      |     |       |     |     |                                    |      |     |       |     |     |                                |      |     |     |     |     |                  |      |     |     |     |     |                 |      |     |     |     |     |                               |      |     |    |     |    |   |      |     |     |     |     |   |      |     |    |     |    |  |       |     |     |     |     |   |      |     |     |     |     |  |      |                           |  |  |  |  |      |                           |  |  |  |  |      |                                   |  |  |  |  |                   |  |  |  |  |  |       |
| 107  | 480   | 207             | 240             | Plant filing fee   |                   |                 |          |     |     |     |                    |                                     |      |     |     |     |                   |   |      |     |     |     |                  |                           |      |     |       |     |                    |  |      |     |      |     |                        |  |                   |     |        |     |        |   |              |              |                |          |    |  |      |          |                    |     |          |   |                    |     |     |        |                |  |                |                 |                 |          |     |   |      |     |                        |     |     |  |      |     |                                   |     |     |                  |      |     |                                       |     |     |  |      |     |  |     |     |                          |      |     |  |     |                   |   |      |     |     |        |    |                                  |      |     |       |     |     |                                    |      |     |       |     |     |                                |      |     |     |     |     |                  |      |     |     |     |     |                 |      |     |     |     |     |                               |      |     |    |     |    |   |      |     |     |     |     |   |      |     |    |     |    |  |       |     |     |     |     |   |      |     |     |     |     |  |      |                           |  |  |  |  |      |                           |  |  |  |  |      |                                   |  |  |  |  |                   |  |  |  |  |  |       |
| 108  | 760   | 208             | 380             | Reissue filing fee   |                   |                 |          |     |     |     |                    |                                     |      |     |     |     |                   |   |      |     |     |     |                  |                           |      |     |       |     |                    |  |      |     |      |     |                        |  |                   |     |        |     |        |   |              |              |                |          |    |  |      |          |                    |     |          |   |                    |     |     |        |                |  |                |                 |                 |          |     |   |      |     |                        |     |     |  |      |     |                                   |     |     |                  |      |     |                                       |     |     |  |      |     |  |     |     |                          |      |     |  |     |                   |   |      |     |     |        |    |                                  |      |     |       |     |     |                                    |      |     |       |     |     |                                |      |     |     |     |     |                  |      |     |     |     |     |                 |      |     |     |     |     |                               |      |     |    |     |    |   |      |     |     |     |     |   |      |     |    |     |    |  |       |     |     |     |     |   |      |     |     |     |     |  |      |                           |  |  |  |  |      |                           |  |  |  |  |      |                                   |  |  |  |  |                   |  |  |  |  |  |       |
| 114  | 150   | 214             | 75              | Provisional filing fee   |                   |                 |          |     |     |     |                    |                                     |      |     |     |     |                   |   |      |     |     |     |                  |                           |      |     |       |     |                    |  |      |     |      |     |                        |  |                   |     |        |     |        |   |              |              |                |          |    |  |      |          |                    |     |          |   |                    |     |     |        |                |  |                |                 |                 |          |     |   |      |     |                        |     |     |  |      |     |                                   |     |     |                  |      |     |                                       |     |     |  |      |     |  |     |     |                          |      |     |  |     |                   |   |      |     |     |        |    |                                  |      |     |       |     |     |                                    |      |     |       |     |     |                                |      |     |     |     |     |                  |      |     |     |     |     |                 |      |     |     |     |     |                               |      |     |    |     |    |   |      |     |     |     |     |   |      |     |    |     |    |  |       |     |     |     |     |   |      |     |     |     |     |  |      |                           |  |  |  |  |      |                           |  |  |  |  |      |                                   |  |  |  |  |                   |  |  |  |  |  |       |
| SUBTOTAL (1) (\$)  |   |                 |                 |  | 690.00            |                 |          |     |     |     |                    |                                     |      |     |     |     |                   |   |      |     |     |     |                  |                           |      |     |       |     |                    |  |      |     |      |     |                        |  |                   |     |        |     |        |   |              |              |                |          |    |  |      |          |                    |     |          |   |                    |     |     |        |                |  |                |                 |                 |          |     |   |      |     |                        |     |     |  |      |     |                                   |     |     |                  |      |     |                                       |     |     |  |      |     |  |     |     |                          |      |     |  |     |                   |   |      |     |     |        |    |                                  |      |     |       |     |     |                                    |      |     |       |     |     |                                |      |     |     |     |     |                  |      |     |     |     |     |                 |      |     |     |     |     |                               |      |     |    |     |    |   |      |     |     |     |     |   |      |     |    |     |    |  |       |     |     |     |     |   |      |     |     |     |     |  |      |                           |  |  |  |  |      |                           |  |  |  |  |      |                                   |  |  |  |  |                   |  |  |  |  |  |       |
| Total Claims   | Extra Claims  | Fee from below  | Fee Paid        |  |                   |                 |          |     |     |     |                    |                                     |      |     |     |     |                   |   |      |     |     |     |                  |                           |      |     |       |     |                    |  |      |     |      |     |                        |  |                   |     |        |     |        |   |              |              |                |          |    |  |      |          |                    |     |          |   |                    |     |     |        |                |  |                |                 |                 |          |     |   |      |     |                        |     |     |  |      |     |                                   |     |     |                  |      |     |                                       |     |     |  |      |     |  |     |     |                          |      |     |  |     |                   |   |      |     |     |        |    |                                  |      |     |       |     |     |                                    |      |     |       |     |     |                                |      |     |     |     |     |                  |      |     |     |     |     |                 |      |     |     |     |     |                               |      |     |    |     |    |   |      |     |     |     |     |   |      |     |    |     |    |  |       |     |     |     |     |   |      |     |     |     |     |  |      |                           |  |  |  |  |      |                           |  |  |  |  |      |                                   |  |  |  |  |                   |  |  |  |  |  |       |
| 37   | -20** = 17  | X 18            | = 306.00        |  |                   |                 |          |     |     |     |                    |                                     |      |     |     |     |                   |   |      |     |     |     |                  |                           |      |     |       |     |                    |  |      |     |      |     |                        |  |                   |     |        |     |        |   |              |              |                |          |    |  |      |          |                    |     |          |   |                    |     |     |        |                |  |                |                 |                 |          |     |   |      |     |                        |     |     |  |      |     |                                   |     |     |                  |      |     |                                       |     |     |  |      |     |  |     |     |                          |      |     |  |     |                   |   |      |     |     |        |    |                                  |      |     |       |     |     |                                    |      |     |       |     |     |                                |      |     |     |     |     |                  |      |     |     |     |     |                 |      |     |     |     |     |                               |      |     |    |     |    |   |      |     |     |     |     |   |      |     |    |     |    |  |       |     |     |     |     |   |      |     |     |     |     |  |      |                           |  |  |  |  |      |                           |  |  |  |  |      |                                   |  |  |  |  |                   |  |  |  |  |  |       |
| Independent Claims   | 3   | -3** = 0        | X = 0.00        |  |                   |                 |          |     |     |     |                    |                                     |      |     |     |     |                   |   |      |     |     |     |                  |                           |      |     |       |     |                    |  |      |     |      |     |                        |  |                   |     |        |     |        |   |              |              |                |          |    |  |      |          |                    |     |          |   |                    |     |     |        |                |  |                |                 |                 |          |     |   |      |     |                        |     |     |  |      |     |                                   |     |     |                  |      |     |                                       |     |     |  |      |     |  |     |     |                          |      |     |  |     |                   |   |      |     |     |        |    |                                  |      |     |       |     |     |                                    |      |     |       |     |     |                                |      |     |     |     |     |                  |      |     |     |     |     |                 |      |     |     |     |     |                               |      |     |    |     |    |   |      |     |     |     |     |   |      |     |    |     |    |  |       |     |     |     |     |   |      |     |     |     |     |  |      |                           |  |  |  |  |      |                           |  |  |  |  |      |                                   |  |  |  |  |                   |  |  |  |  |  |       |
| Multiple Dependent   |   |                 | = 0.00          |  |                   |                 |          |     |     |     |                    |                                     |      |     |     |     |                   |   |      |     |     |     |                  |                           |      |     |       |     |                    |  |      |     |      |     |                        |  |                   |     |        |     |        |   |              |              |                |          |    |  |      |          |                    |     |          |   |                    |     |     |        |                |  |                |                 |                 |          |     |   |      |     |                        |     |     |  |      |     |                                   |     |     |                  |      |     |                                       |     |     |  |      |     |  |     |     |                          |      |     |  |     |                   |   |      |     |     |        |    |                                  |      |     |       |     |     |                                    |      |     |       |     |     |                                |      |     |     |     |     |                  |      |     |     |     |     |                 |      |     |     |     |     |                               |      |     |    |     |    |   |      |     |     |     |     |   |      |     |    |     |    |  |       |     |     |     |     |   |      |     |     |     |     |  |      |                           |  |  |  |  |      |                           |  |  |  |  |      |                                   |  |  |  |  |                   |  |  |  |  |  |       |
| Large Fee Code   | Entity Fee (\$)   | Small Fee Code  | Entity Fee (\$) | Fee Description  | Fee Paid          |                 |          |     |     |     |                    |                                     |      |     |     |     |                   |   |      |     |     |     |                  |                           |      |     |       |     |                    |  |      |     |      |     |                        |  |                   |     |        |     |        |   |              |              |                |          |    |  |      |          |                    |     |          |   |                    |     |     |        |                |  |                |                 |                 |          |     |   |      |     |                        |     |     |  |      |     |                                   |     |     |                  |      |     |                                       |     |     |  |      |     |  |     |     |                          |      |     |  |     |                   |   |      |     |     |        |    |                                  |      |     |       |     |     |                                    |      |     |       |     |     |                                |      |     |     |     |     |                  |      |     |     |     |     |                 |      |     |     |     |     |                               |      |     |    |     |    |   |      |     |     |     |     |   |      |     |    |     |    |  |       |     |     |     |     |   |      |     |     |     |     |  |      |                           |  |  |  |  |      |                           |  |  |  |  |      |                                   |  |  |  |  |                   |  |  |  |  |  |       |
| 103  | 18  | 203             | 9               | Claims in excess of 20   |                   |                 |          |     |     |     |                    |                                     |      |     |     |     |                   |   |      |     |     |     |                  |                           |      |     |       |     |                    |  |      |     |      |     |                        |  |                   |     |        |     |        |   |              |              |                |          |    |  |      |          |                    |     |          |   |                    |     |     |        |                |  |                |                 |                 |          |     |   |      |     |                        |     |     |  |      |     |                                   |     |     |                  |      |     |                                       |     |     |  |      |     |  |     |     |                          |      |     |  |     |                   |   |      |     |     |        |    |                                  |      |     |       |     |     |                                    |      |     |       |     |     |                                |      |     |     |     |     |                  |      |     |     |     |     |                 |      |     |     |     |     |                               |      |     |    |     |    |   |      |     |     |     |     |   |      |     |    |     |    |  |       |     |     |     |     |   |      |     |     |     |     |  |      |                           |  |  |  |  |      |                           |  |  |  |  |      |                                   |  |  |  |  |                   |  |  |  |  |  |       |
| 102  | 78  | 202             | 39              | Independent claims in excess of 3  |                   |                 |          |     |     |     |                    |                                     |      |     |     |     |                   |   |      |     |     |     |                  |                           |      |     |       |     |                    |  |      |     |      |     |                        |  |                   |     |        |     |        |   |              |              |                |          |    |  |      |          |                    |     |          |   |                    |     |     |        |                |  |                |                 |                 |          |     |   |      |     |                        |     |     |  |      |     |                                   |     |     |                  |      |     |                                       |     |     |  |      |     |  |     |     |                          |      |     |  |     |                   |   |      |     |     |        |    |                                  |      |     |       |     |     |                                    |      |     |       |     |     |                                |      |     |     |     |     |                  |      |     |     |     |     |                 |      |     |     |     |     |                               |      |     |    |     |    |   |      |     |     |     |     |   |      |     |    |     |    |  |       |     |     |     |     |   |      |     |     |     |     |  |      |                           |  |  |  |  |      |                           |  |  |  |  |      |                                   |  |  |  |  |                   |  |  |  |  |  |       |
| 104  | 260   | 204             | 130             | Multiple dependent claim, if not paid                                      |                   |                 |          |     |     |     |                    |                                     |      |     |     |     |                   |   |      |     |     |     |                  |                           |      |     |       |     |                    |  |      |     |      |     |                        |  |                   |     |        |     |        |   |              |              |                |          |    |  |      |          |                    |     |          |   |                    |     |     |        |                |  |                |                 |                 |          |     |   |      |     |                        |     |     |  |      |     |                                   |     |     |                  |      |     |                                       |     |     |  |      |     |  |     |     |                          |      |     |  |     |                   |   |      |     |     |        |    |                                  |      |     |       |     |     |                                    |      |     |       |     |     |                                |      |     |     |     |     |                  |      |     |     |     |     |                 |      |     |     |     |     |                               |      |     |    |     |    |   |      |     |     |     |     |   |      |     |    |     |    |  |       |     |     |     |     |   |      |     |     |     |     |  |      |                           |  |  |  |  |      |                           |  |  |  |  |      |                                   |  |  |  |  |                   |  |  |  |  |  |       |
| 109  | 78  | 209             | 39              | ** Reissue independent claims over original patent                         |                   |                 |          |     |     |     |                    |                                     |      |     |     |     |                   |   |      |     |     |     |                  |                           |      |     |       |     |                    |  |      |     |      |     |                        |  |                   |     |        |     |        |   |              |              |                |          |    |  |      |          |                    |     |          |   |                    |     |     |        |                |  |                |                 |                 |          |     |   |      |     |                        |     |     |  |      |     |                                   |     |     |                  |      |     |                                       |     |     |  |      |     |  |     |     |                          |      |     |  |     |                   |   |      |     |     |        |    |                                  |      |     |       |     |     |                                    |      |     |       |     |     |                                |      |     |     |     |     |                  |      |     |     |     |     |                 |      |     |     |     |     |                               |      |     |    |     |    |   |      |     |     |     |     |   |      |     |    |     |    |  |       |     |     |     |     |   |      |     |     |     |     |  |      |                           |  |  |  |  |      |                           |  |  |  |  |      |                                   |  |  |  |  |                   |  |  |  |  |  |       |
| 110  | 18  | 210             | 9               | ** Reissue claims in excess of 20 and over original patent                 |                   |                 |          |     |     |     |                    |                                     |      |     |     |     |                   |   |      |     |     |     |                  |                           |      |     |       |     |                    |  |      |     |      |     |                        |  |                   |     |        |     |        |   |              |              |                |          |    |  |      |          |                    |     |          |   |                    |     |     |        |                |  |                |                 |                 |          |     |   |      |     |                        |     |     |  |      |     |                                   |     |     |                  |      |     |                                       |     |     |  |      |     |  |     |     |                          |      |     |  |     |                   |   |      |     |     |        |    |                                  |      |     |       |     |     |                                    |      |     |       |     |     |                                |      |     |     |     |     |                  |      |     |     |     |     |                 |      |     |     |     |     |                               |      |     |    |     |    |   |      |     |     |     |     |   |      |     |    |     |    |  |       |     |     |     |     |   |      |     |     |     |     |  |      |                           |  |  |  |  |      |                           |  |  |  |  |      |                                   |  |  |  |  |                   |  |  |  |  |  |       |
| SUBTOTAL (2) (\$)  |   |                 |                 |  | 306.00            |                 |          |     |     |     |                    |                                     |      |     |     |     |                   |   |      |     |     |     |                  |                           |      |     |       |     |                    |  |      |     |      |     |                        |  |                   |     |        |     |        |   |              |              |                |          |    |  |      |          |                    |     |          |   |                    |     |     |        |                |  |                |                 |                 |          |     |   |      |     |                        |     |     |  |      |     |                                   |     |     |                  |      |     |                                       |     |     |  |      |     |  |     |     |                          |      |     |  |     |                   |   |      |     |     |        |    |                                  |      |     |       |     |     |                                    |      |     |       |     |     |                                |      |     |     |     |     |                  |      |     |     |     |     |                 |      |     |     |     |     |                               |      |     |    |     |    |   |      |     |     |     |     |   |      |     |    |     |    |  |       |     |     |     |     |   |      |     |     |     |     |  |      |                           |  |  |  |  |      |                           |  |  |  |  |      |                                   |  |  |  |  |                   |  |  |  |  |  |       |

  

| SUBMITTED BY          |                          | Complete (if applicable) |         |
|-----------------------|--------------------------|--------------------------|---------|
| Typed or Printed Name | David G. Latwesen, Ph.D. | Reg. Number              | 38,533  |
| Signature             |                          | Date                     | 1/20/00 |
|                       |                          | Deposit Account User ID  |         |

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.